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Division of Corporations Fax Number : (850)617-6381

From:

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Fax Number	•	(842)818-2288	

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Smart Me			
(Enter name of co "Inc.," "Co.," "Co	rporation; must include "INCORPORATED rp," "Inc," "Co." or "Corp.")	" "COMPANY," "CORPORATION,"	
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting busin	ess in Florida)
, New York	ζ 3	, 	
(State or country u	nder the law of which it is incorporated)	(FEI number, if applicable)	
₄ 6/6/2012	5	Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist o	x "perpetual")
6.			
· · · · · · · · · · · · · · · · · · ·		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
268 Now I	Hempstead Road Suite 3		
7.000 14844 1	Principal office ad		*
New City,	• •	are207	
	(Current mailing ad	dress)	<u></u>
	ievelopment		
(Purpose(s) of corporation authorized in home state or c	country to be carried out in state of Florida)	「「「「「」」を
9. Name and street	t address of Florida registered agent: (P	.O. Box <u>NOT</u> acceptable)	
Name:	Vcorp Services, LLC		
	5011 South State Road 7, Suite	 106	
Office Address:			
	Davie	, Florida 33314	SE N
	(City)	(Zip code)	26 122

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and ogree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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		FILED
12. Narr	es and business addresses of officers and/or directors:	14 NOV 24 PM 2: 2
A. DIRI	ECTORS	. RECEPTATE OF STATE
Chairman	i	TALLARASSIE, FLORD
Address:		
Vice Cha	irnian:	
Address:		
Director;	· · · · · · · · · · · · · · · · · · ·	• •
Address:		
Director:		
Address:		
B. OFF		
	Eliezer Scheiner 368 New Hempstead Road Suite 309	<u></u>
Address:	New City, NY 10956	•
Vice Pres	ident:	
Address:		
Secretary	·····	
Treasurer	·	
Address:		
NOTE:	If necessary, you may attach an addendum to the application listing a	additional officers and/or directors.

14. Eliezer Scheiner, President

(Typed or printed name and capacity of person signing application)

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State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SMART METER CORP. was filed on 06/06/2012, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A Biennial Statement was filed 09/30/2014.

I further certify that no other documents have been filed by such corporation.



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Witness my hand and the official seal of the Department of State at the City of Albany, this 21st day of November two thousand and fourteen.

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Anthony Giardina Executive Deputy Secretary of State

